#### Department use only envelope # 630 FSN

# **Alaska Vehicle Rental Tax Quarterly** Tax Refurn

I MA I I C LUI II				
Federal EIN or SSN			AK business License #	Calendar Quarter Ending
Name			Telephone	Fax
Mailing Address			Contact Telephone	Title
City	State	Zip + 4	Contact Person	
Physical Locations(s) Where R	tental Transacti	ons Take Place (use	additional sheets as necessary):	
Tax Computation	n - Pass	enger Veh	icles	

1.	GROSS FEES AND COSTS charged for the rental or lease of passenger vehicles during this report	
2.	Less: TAX EXEMPT fees and costs charged for the rental or lease of passenger vehicles during this report period:	(
3.	NET TAXABLE FEES AND COSTS charged for the rental or lease of passenger vehicles during this report period (line 1 less line 2):	
4.	Tax (multiply line 3 by 10% or .10):	

#### Tax Computation - Recreational Vehicles

5.	GROSS FEES AND COSTS charged for the rental or lease or recreational vehicles during this report period:		
6.	Less: TAX EXEMPT fees and costs charged for the rental or lease of recreational vehicles during this report period:	(	)
7.	NET TAXABLE FEES AND COSTS charged for the rental or lease of recreational vehicles during this report period (line 5 less line 6)		
8.	Tax (multiply line 7 by 3% or .03):		

## Tax Computation - Passenger Vehicles

9.	TAX LIABILITY (add lines 4 and 8):	
10.	LESS VEHICLE RENTAL TAXES PREVIOUSLY PAID this quarter (see instructions)	( )
11.	TOTAL TAX DUE or (REFUND) (line 9 less line 10):	

### **Electronic Payment Information**

Note: If your liability is \$100,000 or more, you must use the Online To	ax Information System (OTIS) at <u>www.tax.alaska.go</u>	<u>v</u> or wire transfer
Check if you are remitting by: □OTIS confirmation #	Wire transfer date	
I declare under penalty of perjury that the information provided in this return has been reviewed by me, and to the best of my knowledge and belief is true, correct, and complete. If prepared by a person other then the taxpayer, preparer's declaration is based on all information of which preparer has any knowledge. (AS 43.05.290).		
Signature	Type or Print Name	Date

Pay online at <u>www.tax.alaska.gov</u> or make check payable to State of Alaska

Department use or	nly PMD
Validation	

Mail to: Alaska Department of Revenue - Tax Division PO Box 110420 Juneau AK 99811-0420 Telephone 907-465-2320 Fax 907-465-3566